

APPLICATION DATA SHEET

Inventor Information

Inventor One Given Name:: Charles E.
Family Name:: Wood
Postal Address Line One:: 955 Fern Drive
City:: Delray Beach
State of Province:: FL
Postal or Zip Code:: 33483
Citizenship Country:: USA

Correspondence Information

Name Line One:: Mark D. Bowen
Name Line Two:: Stearns Weaver Miller, et al.
Address Line One:: 200 East Broward Boulevard
Address Line Two:: Suite 1900
City:: Fort Lauderdale
State or Province:: FL
Postal or Zip Code:: 33301
Telephone One:: (954) 462-9500
Fax:: (954) 462-9567
Electronic Mail:: Mbowen@SWMWAS.com

Application Information

Title Line One:: Internal Nasal Dilator
Total Drawing Sheets:: 3
Formal Drawings?:: No
Application Type:: Utility
Docket Number:: 4744.001

Representative Information

Representative Customer Number: 27324

Continuity Information

This application is a:: Non-Provisional
>Application One:: 60/439,850
Filing Date:: January 14, 2003